

| REPORTS INVENTORY | | | | | | CONTROL NO. | | | | | | | | | |
|--|--|---|------------------|---|--------------------------------|--|--|---------------------------------|---|--------------------------------------|--|-----------------|--|---------|--|
| PREPARE IN DUPLICATE | | | | | | DDS/OP/BSD | | | | | | | | | |
| 1. TITLE OF REPORT (if a fill-in report include Form No.) | | | | | | 2. TYPE OF REPORT | | | | | | | | | |
| Report of Separation Form 971c | | | | | | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; text-align: center;">STATISTICAL</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/> NARRATIVE</td> </tr> <tr> <td style="text-align: center;">MACHINE-NAME LISTING</td> </tr> </table> | | STATISTICAL | <input checked="" type="checkbox"/> NARRATIVE | MACHINE-NAME LISTING | | | | | |
| STATISTICAL | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> NARRATIVE | | | | | | | | | | | | | | | |
| MACHINE-NAME LISTING | | | | | | | | | | | | | | | |
| 3. FUNCTIONAL AREA | | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; text-align: center;"><input checked="" type="checkbox"/> PERSONNEL</td> <td style="width:50%; text-align: center;">TRAINING</td> </tr> <tr> <td style="text-align: center;">LOGISTICS</td> <td style="text-align: center;">SECURITY</td> </tr> <tr> <td style="text-align: center;">MEDICAL</td> <td style="text-align: center;">FINANCE</td> </tr> </table> | | <input checked="" type="checkbox"/> PERSONNEL | TRAINING | LOGISTICS | SECURITY | MEDICAL | FINANCE | ADMIN. GENERAL | | OTHER (specify) | | | |
| <input checked="" type="checkbox"/> PERSONNEL | TRAINING | | | | | | | | | | | | | | |
| LOGISTICS | SECURITY | | | | | | | | | | | | | | |
| MEDICAL | FINANCE | | | | | | | | | | | | | | |
| 4. NO. OF COPIES PREPARED | | 5. FREQUENCY (weekly, monthly, quarterly, etc.) | | 6. DISTRIBUTION (No. of components not number of copies) | | | | | | | | | | | |
| One | | Continuing - daily 2000 per year | | One | | | | | | | | | | | |
| 7. FORMAT (memorandum, form computer print-out, etc) | | 8. ADP PROCESSING | | 9. DIRECTIVE AUTHORITY REQUIRING REPORT | | | | | | | | | | | |
| Memorandum | | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; text-align: center;">YES</td> <td style="width:50%; text-align: center;">IF YES GIVE ADP PROCESSING NO.</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/> NO</td> <td></td> </tr> </table> | | YES | IF YES GIVE ADP PROCESSING NO. | <input checked="" type="checkbox"/> NO | | STAT | | | | | | | |
| YES | IF YES GIVE ADP PROCESSING NO. | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> NO | | | | | | | | | | | | | | | |
| 10. PREPARING COMPONENT (include lowest level contributing information to report) | | | | 11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.) | | | | | | | | | | | |
| OP/BSD/PAB | | | | NA | | | | | | | | | | | |
| 12. COST FACTORS | | | | | | | | | | | | | | | |
| A. MANUAL PREPARATION AND REVIEW COSTS | | | | | | | | | | | | | | | |
| GRADE | HOURLY RATE | X | HOURS PER REPORT | = | COST PER REPORT | X | TIMES PREPARED = COST PER YEAR | | | | | | | | |
| GS-5 GS-12 | Ave. \$5.00 | | 1/4 hour | | \$1.25 | | 2000 per year \$2,500.00 | | | | | | | | |
| B. COSTS OF COMPUTER PRODUCED REPORTS | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| TOTAL COSTS PER YEAR | | | | | | \$2,500.00 | | | | | | | | | |
| 13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (In addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT. | | | | | | | | | | | | | | | |
| To determine reason for separation, profit from suggestions made by employees and make sure employees leave in best possible frame of mind. | | | | | | | | | | | | | | | |
| 1951 - DDS | | | | | | | | | | | | | | | |
| 14. FUTURE GOALS | | | | | | | | | | | | | | | |
| GOAL PROPOSED BY COMPONENT FOR THIS REPORT | | | | | | ESTIMATED SAVINGS | | | | | | | | | |
| <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; text-align: center;"><input checked="" type="checkbox"/> RETAIN AS IS</td> <td style="width:50%; text-align: center;"><input type="checkbox"/> OTHER (explain)</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/> CHANGE</td> <td></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/> DISCONTINUE</td> <td></td> </tr> </table> | | | | | | <input checked="" type="checkbox"/> RETAIN AS IS | <input type="checkbox"/> OTHER (explain) | <input type="checkbox"/> CHANGE | | <input type="checkbox"/> DISCONTINUE | | MAN-HOURS | | DOLLARS | |
| <input checked="" type="checkbox"/> RETAIN AS IS | <input type="checkbox"/> OTHER (explain) | | | | | | | | | | | | | | |
| <input type="checkbox"/> CHANGE | | | | | | | | | | | | | | | |
| <input type="checkbox"/> DISCONTINUE | | | | | | | | | | | | | | | |
| | | | | | | NA | | | | | | | | | |
| 16. DATE OF INVENTORY | | FURNISHING INFORMATION | | | | | | | | | | | | | |
| 8 October 1970 | | Approved For Release 2006/11/13 : CIA-RDP75-00399R000100150011-9 Acting Chief, Personal Affairs Br. | | | | | | | | | | | | | |